



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)
(D/A1083) 1508/3280

| | | |
|---|---|---------------------------------|
| CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at _____, on September 30, 2004. | In re Application of Warren K. Edwards et al. | |
| | Application Number 09/838,933 | Filed 4/20/2001 |
| For SYSTEM AND METHOD FOR ENABLING COMMUNICATION AMONG ARBITRARY COMPONENTS | | |
| Signature: <u>Sherri A. Moscato</u> | Group Art Unit 2135 | Examiner Monplaisir G. Hamilton |
| Name: Sherri A. Moscato | | |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows
(check time period desired):

- | | |
|--|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$55/\$110) | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$210/\$420) | \$ _____ |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$475/\$950) | \$ 950.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$740/\$1480) | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1005/\$2010) | \$ _____ |
| | |
| <input type="checkbox"/> Applicant claims small entity status. | |
| <input checked="" type="checkbox"/> A check to cover the fee is enclosed. | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | |
| <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. | |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account Number <u>14-1138</u> . I have enclosed a duplicate copy of this sheet. | |

I am the applicant/inventor

- assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- attorney or agent of record.
- attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

9/30/2004

Date

Gunnar Leinberg
Signature

Gunnar G. Leinberg
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

10/05/2004 BSAYASI1 00000007 141138 09838933
01 FC:1253 980.00 OP
Adjustment date: 10/06/2004 BSAYASI1 09838933
10/05/2004 BSAYASI1 00000007 141138 -980.00 OP
01 FC:1253

10/06/2004 BSAYASI1 00000044 09838933

01 FC:1253 950.00 OP
02 FC:1814 110.00 OP

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